## UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF GEORGIA ATLANTA DIVISION

IN RE: PARA LIABILITY L	GARD PRODUCTS ITIGATION	: MDL DOCKET NO. 2974			
This documen	t relates to:	: 1:20-md-02974-LMM			
ABBY DAVIS					
VS.		Civil Action No.:			
TEVA PHARMACEUTICALS USA, INC., ET AL.					
SHORT FORM COMPLAINT					
Come(s) now the Plaintiff(s) named below, and for her/their Complaint					
against the Defendant(s) named below, incorporate(s) the Second Amended Master					
Personal Injury Complaint (Doc. No. 79), in MDL No. 2974 by reference.					
Plaintiff(s) further plead(s) as follows:					
1. Na	ame of Plaintiff placed with	Paragard: Abby Davis			
		<u> </u>			
2. Na	ame of Plaintiff's Spouse (if	a party to the case): N/A			

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ľ	State of Residence of each Plaintiff (including any Plaintiff in representative capacity) at time of filing of Plaintiff's origin complaint:    Florida
	State of Residence of each Plaintiff at the time of Paragard placeme Arizona
	State of Residence of each Plaintiff at the time of Paragard removal Florida
	District Court and Division in which personal jurisdiction and venue would be proper:  Florida Middle District Court - Tampa, FL
	Defendants. (Check one or more of the following five (5) Defenda
	against whom Plaintiff's Complaint is made. The following five
	Defendants are the only defendants against whom a Short Fo
	·

in a Short Form Complaint.):

$\checkmark$	A. Teva Pharmaceuticals USA, Inc.
$\checkmark$	B. Teva Women's Health, LLC
$\checkmark$	C. Teva Branded Pharmaceutical Products R&D, Inc.
$\checkmark$	D. The Cooper Companies, Inc.
$\checkmark$	E. CooperSurgical, Inc.
9.	Basis of Jurisdiction
$\checkmark$	Diversity of Citizenship (28 U.S.C. § 1332(a))
	Other (if Other, identify below):
10.	

Date(s) Plaintiff had Paragard placed (DD/MM/YYYY)	Placing Physician(s) or other Health Care Provider (include City and State)	Date Plaintiff's Paragard was Removed (DD/MM/YYYY)*  *If multiple removal(s) or attempted removal procedures, list date of each separately.	Removal Physician(s) or other Health Care Provider (include City and State)**  **If multiple removal(s) or attempted removal procedures, list information separately.
11/14/2017	Cindy Udall, WHNP-BC, Valley Women For Women, 3815 S. Val Vista, Ste. 101, Gilbert, AZ 85297	04/05/2022	Lori Stabinski, APRN, Womens Care Florida, 10909 W. Linebaugh Ave., Ste. 104, Tampa, FL 33626
		04/26/2022	Lori Stabinski, APRN, Womens Care Florida, 10909 W. Linebaugh Ave., Ste. 104, Tampa, FL 33626
		12/15/2022	Ryan Neuhaus, MD, St. Joseph's Women's Hospital, 3030 W. Dr. Martin Luther King Jr. Blvd., Tampa, FL 33607
		03/28/2023	Ryan Neuhaus, MD, St. Joseph's Women's Hospital, 3030 W. Dr. Martin Luther King Jr. Blvd., Tampa, FL 33607

Plaintiff alleges breakage (other than thread or string breakage) of l			f her					
Parag	ard upon re	moval.						
Yes								
No								
	statement o		` /			iming: ntiff suffered me	ental and phy	′sical
injuries i	ncluding but not lir	mited to, mult	iple remova	al proce	edures, pain,	suffering, and loss o	of reproductive h	nealth.
Plain	iff reserve	es her	right	to	allege	additional	injuries	and
comp	lications sp	ecific to	her.					
Produ	ıct Identific	ation:						
	ot Number onknown at th	•	ard plac	ced i	n Plaint	iff (if now k	nown):	
b. Di	d you ob	tain yo	ur Par	agar	d from	anyone o	ther than	the
Н	ealthCare P	rovider	who pla	aced	your Pa	ragard:		
	Yes							
<b>√</b>	No							
Coun	ts in the Ma	aster Co	mplaint	t bro	ught by	Plaintiff(s):		
Coun	t I – Strict I	Liability	/ Desig	gn D	efect			
Coun	t II – Strict	Liability	y / Failı	ure t	o Warn			
Coun	t III – Strict	t Liabili <sup>.</sup>	ty / Ma	nufa	cturing	Defect		
	t IV – Negl				C			
	C		Design	and	Manufa	cturing Defe	ect	
Coun	8		8 -			6		

$\checkmark$	Cour	nt IX – Negligent Misrepresentation					
<b>√</b>	Count X – Breach of Express Warranty						
	Count XI – Breach of Implied Warranty						
<b>✓</b>	Cour	Count XII – Violation of Consumer Protection Laws					
<b>√</b>	Count XIII – Gross Negligence						
<b>√</b>	Count XIV – Unjust Enrichment						
<b>√</b>	Count XV – Punitive Damages						
	Count XVI – Loss of Consortium						
	Othe	Other Count(s) (Please state factual and legal basis for other claims					
not i	nclude	d in the Master Complaint below):					
15.	"Tol	ling/Fraudulent Concealment" allegations:  Is Plaintiff alleging "Tolling/Fraudulent Concealment"?					
	$\checkmark$	Yes					
		No					
	b.						
		If Plaintiff is alleging "tolling/fraudulent concealment" beyond					
		If Plaintiff is alleging "tolling/fraudulent concealment" beyond the facts alleged in the Master Complaint, please state the facts					
		the facts alleged in the Master Complaint, please state the facts					

16.	Cour	nt VII (Fraud & Deceit) and Count VIII (Fraud by Omission)					
	alleg	allegations:					
	a.	Is Plaintiff is bringing a claim under Count VII (Fraud &					
		Deceit), Count VIII (Fraud by Omission), and/or any other claim					
		for fraud or misrepresentation?					
	$\checkmark$	Yes					
		No					
	b.	If Yes, the following information must be provided (in					
		accordance with Federal Rule of Civil Procedure 8 and/or 9,					
		and/or with pleading requirements applicable to Plaintiff's state					
		law claims):					
	i.	The alleged statement(s) of material fact that Plaintiff alleges was false:  Paragard was a safe, effective and reversible form of birth					
		control and Paragard was safe or safer than other products on the market.					
	ii.	Who allegedly made the statement: Defendants					
	iii.	To whom the statement was allegedly made: Plaintiff and her implanting physician.					
	iv.	The date(s) on which the statement was allegedly made:  Defendants' statements in its label and marketing materials at all relevant times prior to implant.					
17.	If Pla	If Plaintiff is bringing any claim for manufacturing defect and alleging					
	facts	beyond those contained in the Master Complaint, the following					
	infor	mation must be provided:					
	a.	What does Plaintiff allege is the manufacturing defect in her Paragard? N/A					

18. Plaintiff's demand for the relief sought if different than wha		
	alleged in the Master Complaint: N/A	
19.	Jury Demand:	
$\checkmark$	Jury Trial is demanded as to all counts	
	Jury Trial is NOT demanded as to any count	
	s/ Robert M. Hammers, Jr.	
	Attorney(s) for Plaintiff	
Address, ph	one number, email address and Bar information:	
_5555 Gle	nridge Connector, Suite 975	
	GA 30342	